

# 2014 Supporting You to Help Others Grant application form



Please email completed applications to [resources@macmillan.org.uk](mailto:resources@macmillan.org.uk)

Hard copies can be sent to:  
Inclusion admin & project support officer  
Macmillan Cancer Support  
FREEPOST RLTC-ARUZ-ELSC  
89 Albert Embankment  
London, SE1 7UQ

**For Office Use ONLY**

Ref No: \_\_\_\_\_

Date entered: \_\_\_\_\_

Region: \_\_\_\_\_

**THIS IS AN EXAMPLE OF A SELF HELP AND SUPPORT GRANT APPLICATION – THE NAMES OF PEOPLE AND PLACES HAVE BEEN REMOVED TO COMPLY WITH DATA PROTECTION.**

**PLEASE READ THE GUIDANCE NOTES BEFORE YOU COMPLETE THIS FORM**

## Contact information

Group, Individual, Organisation name:	
Contact name:	
Contact role:	
Address for correspondence:	
Postcode:	
Daytime telephone:	
Email address:	
Website address:	
Please indicate preferred contact method(s) below:	
Daytime telephone no:	<input type="checkbox"/>
Email address:	<input type="checkbox"/>
Do you have any specific communication needs? If yes, please describe below:	Yes <input type="checkbox"/> No <input type="checkbox"/>
<i>(Where possible we will endeavour to accommodate these needs.)</i>	
Please provide the 2 <sup>nd</sup> contact details for the application below:	
Name:	
Address:	
Email:	

Tel:

## INFORMATION ABOUT YOUR PLANNED ACTIVITIES

### 1. Please tell us briefly about the background to/or reason for the group/project or activity.

Our group supports the communities of, and around, \_\_\_\_\_ and \_\_\_\_\_. Its aim is to alleviate the physical and emotional distress of adult cancer patients, their carers, families and friends. We do this by monthly support meetings in the three towns, including relaxation therapies, and by providing summer and Christmas social outings. Meetings major on generating an atmosphere of mutual support, friendship and fun. All of this helps our clients to realise that despite their problems they can still enjoy a good quality of life and that they are part of a caring community.

### 2. Please tell us:

- **what you want to do**
- **why you want to do it**
- **how this will benefit people affected by cancer**

- a. **Change of Name** Our charity recently celebrated its 15<sup>th</sup> Anniversary. Since formation in 1998 it has extended its reach, and grown in income and numbers. Established initially to serve the community of \_\_\_\_\_ (hence its name), it then extended to form separate groups in \_\_\_\_\_ and then \_\_\_\_\_. Over 1000 people attended our 36 meetings last year, of whom some 68% were clients the rest were our support team of volunteers, helpers and health professionals (including Macmillan nurses from \_\_\_\_\_ Hospital) and therapists. However, this success story has a drawback in that with a name beginning “\_\_\_\_\_”, it is difficult to write to companies and possible donors in \_\_\_\_\_ and \_\_\_\_\_ to seek funding. Our intention is to change the name and have a strap-line as follows:

**The \_\_\_\_\_ Cancer Support Group - serving the communities of \_\_\_\_\_, \_\_\_\_\_, and \_\_\_\_\_**

Under the terms of the Charity's Constitution, we will seek formally agreement to the name change at our AGM due on 24<sup>th</sup> July. This is expected to be carried.

Our bid under this heading is for additional printing, stationery, calling cards, office expenses that will necessarily follow from this change.

- b. **Additional Monthly Support Meeting** Our support meetings are held in 3 different weeks each month. \_\_\_\_\_ (1<sup>st</sup> week), \_\_\_\_\_ (2<sup>nd</sup> week), \_\_\_\_\_ (3<sup>rd</sup> week). We plan to have an additional meeting starting in July,. This innovation will take the form of an afternoon tea club which will be held in \_\_\_\_\_ in the 4<sup>th</sup> week. This will be different to the other three meetings; it will focus on conversation and mutual support, held over tea, biscuits and cake. We will not at this stage introduce therapy and its attendant costs. The meeting will be held in \_\_\_\_\_ as the largest group and best facility and will be open to all 3 groups.
- c. **Projector** Over the last year or so I have developed a number of PowerPoint presentations which are used for promotional talks on \_\_\_\_\_ to local business and organisations. Some of the venues that I go to either do not have a projector, or the existing one is incompatible with my laptop. Having this set-up would also allow for projection of key papers at committee and AGM.
- d. **Banners** Our promotion activity e.g. for Tombola stalls, sales of items, would be much enhanced if we had a banner along the front of the tables we use. The banner would also be pinned along the front of any tent/covering that we might use at a promotion event

### 3. Tell us how you know this activity or project is needed

- a. **Change of name** as indicated above when applying to potential donors in \_\_\_\_\_ and \_\_\_\_\_ the message gets confused by the current title. The change will make it easier to attract donors in \_\_\_\_\_ and \_\_\_\_\_, and thus make the group more sustainable.

- b. **The extra meeting** Clients have asked for an extra meeting for some years. We have only been in a position to try this having recruited extra volunteers. A partial survey carried out with clients at all three groups has indicated that between 25-30 people are likely to attend. We hope to have the first meeting on 24 July. The attendance will be monitored and feedback obtained. Our bid under this heading will be for costs of refreshments for one year
- c. **Projector and Screen** having an \_\_\_\_ projector and a portable screen would mean that the delivery of a PowerPoint could be assured. Also use at committee and AGM would reduce the amount of printing that would need to be done, for everyone to have own copy.
- d. **Banners** the banners would increase the visibility of our presence at events

**4. Who will be involved in the group, project or activity and how will they be involved?**

This question is best answered in relation to activity to activity b. This will involve clients from all three venues - \_\_\_\_, \_\_\_\_ and \_\_\_\_, plus the volunteers who will purchase the refreshment, make teas and serve biscuits and cakes.

We will undertake a review after three months to see whether other activities should be embedded in the tea club sessions, e.g. outside speaker. At the moment, our clients seem to be just asking for the opportunity to meet, chat and provide mutual support with their \_\_\_\_ friends in a safe environment, twice a month rather than once.

**5. How will you ensure people affected by cancer from every community can be involved?**

**OR**

**If you only want to invite specific groups of people affected by cancer to be involved, please explain why**

By communications through all our channels – e.g. announcements at group meetings, website, AGM etc. Our current client group know already we will tell new members when they join. We will provide an insert to our new Client Handbook

**6. Tell us how people affected by cancer have contributed to this application**

Re a. Several clients have spotted and queried the anomaly in the charity name.

Re b. Our clients have requested the extra meeting in past feedback.

**7. How will you evaluate the project or activity to find out if it has been successful?**

Collection of attendance data and evaluation, for meetings, delivered therapy and social activity is a standard procedure for us.

The same will apply to our extra meeting – we will collect attendance data, seek feedback via questionnaire after 3 months, and review.

**8. If you are requesting funding for *training and development or conference attendance* in order to implement your plans, please explain the benefits to you and the activity/project**

**9. Finally, list the three main outcomes you hope to achieve with this funding. We will ask how these outcomes have been achieved in your end of grant report.**

**Examples of possible outcomes: Increased membership to the group; better communication and outreach to group members;**

**Outcome one:**

Alleviation of anxieties of patients and carers

**Outcome two:**

Reduction of any feelings that patients and carers might have of loneliness and isolation

**Outcome three:**

Extent to which patients and carers perceive that \_\_\_\_ activity has improved their quality of life.

All three outcomes relate to the first and third of the Macmillan Nine outcomes listed in the guidance notes:

“Those around me are well supported”

“ I feel part of a community and want to give something back”

On the latter point we have a video of a client pair (patient and carer) saying how important it is to them to “give something back”. A key advantage of an \_\_\_\_ meeting is that it allows just that, and the client pair claim that that is why \_\_\_\_ is so successful. The video is 4 mins long and a drop-box link to it can be provided if requested.

**BREAKDOWN OF FUNDING REQUESTED**

Please provide a full breakdown of the funding required stating the cost of each individual item/activity.

Item/Activity	Total cost of item/activity £	Funding requested from Macmillan for item/activity £
e.g. room hire (2hrs x 12 meetings)	£550.00	£250.00
Office costs associated with Change of name	£400.00	£250.00
Extra monthly meeting – tea club at ____ food costs 12 times £30 plus volunteer travel (£400) non-allowable costs - rental (£600) and insurance (£100)	£1100.00	£400.00
Projector e.g. Epson EB-X02 ~ £256 + VAT +postage ~(£325) and Portable screen (£80) 150cm x 150cm square Remote control (£35) plus carry bag (£30)	£500.00	£400.00
Banners – two at £50 each	£100.00	£100.00
<b>Please confirm the total amount you are requesting</b>	<b>£2100.00</b>	<b>£1150.00</b>

Please do not attach any quotes with your application. However we reserve the right to request copies of the quotes you have obtained if necessary.

**PAYMENT OF SUCCESSFUL GRANTS**

(Please read the guidance notes (if we haven't paid you before we will require evidence of the bank account before awards can be paid)

**1. Does your group/project have a bank account in its own name?**

Yes  No

If **yes** please provide the bank account name :

\_\_\_\_\_

If **no** please go to question 2

**2. Are you going to set up a bank account for your group or project?**

Yes  No

If **no** please go to question 3

**3. Has another organisation agreed to hold the grant award (if successful) on your behalf?  
We will contact this organisation to obtain documentation before issuing award cheques.**

Yes  No  If **yes** please provide the following details for this organisation:

3. cont.....

Organisation name/address:
Contact name/ role:
Contact email:
Contact telephone number:

If you have answered 'no' to all 3 questions and are NOT an individual, please note that we are unable to pay grant funds awarded to a group or an organisation by cheque or into a personal bank account

If you are an individual we will discuss the payment options with you if you are successful.

Please make every effort to discuss your application with your local Macmillan Involvement Coordinator (MIC) before submission (details of your local MIC can be found in the guidance notes). **If you do not do so we reserve the right to refuse your application.**

Please do not attach anything to your application (apart from bank details if you have these to hand), however we reserve the right to request copies of quotes if necessary.

**Data Protection:**

By submitting this form you agree to us recording your details on our database, so we can provide you with the best possible support every time you contact us.

We will also contact you from time to time by phone, email, text or post to tell you about how we can support you and how you can get involved with our team. Your details will be kept securely and only shared with our suppliers or partners who work on our behalf or with us to deliver and improve services for people affected by cancer. **We never sell or swap your details with third parties.**

Please tick here if you do not want us to use your information in this way.

**SIGNATURE** (*Electronic signature or typed is acceptable, we **do not** require a hard copy signature*):

*Please **do not attach or enclose** any other documents to this application (apart from bank evidence if applicable)- if we need more supporting information we will contact you*

**Signature:** .....

**Print name:**.....

**Date of signature:**

**BEFORE SUBMITTING YOUR APPLICATION PLEASE CHECK**

- |   |                                     |
|---|-------------------------------------|
| You have contacted your local Macmillan Involvement Coordinator to discuss your application   | <input checked="" type="checkbox"/> |
| You have answered every question  | <input checked="" type="checkbox"/> |
| Your contact details are correct  | <input checked="" type="checkbox"/> |
| The budget headings within your financial breakdown in question 9 reflect the description of the activity or project you plan to undertake in question 2.   | <input checked="" type="checkbox"/> |
| The figures in your financial breakdown are accurate, add up to the total you have given and the funding you have requested from Macmillan does not exceed the upper limit of either £500 or £3000. | <input checked="" type="checkbox"/> |
| You have not enclosed or attached any additional information  | <input checked="" type="checkbox"/> |

**MONITORING INFORMATION**

**Who are you supporting and/or working with? (please tick & give examples)**

- People with a specific cancer type (i.e. breast, prostate).....
- People from a particular community (i.e. men, South Asian, LGBT).....
- Carers .....
- Healthcare professional.....
- People doing a shared activity or interest (i.e. football, gardening, art).....

**When was your group or project set up?**

**Which geographical area/s does your group or project cover?**

**Is your group aimed at a specific group of people? (if so, please specify)**

**A certain age group:**

- 18-26 years old
- 27-35 years old
- 36-45 years old
- 46-55 years old
- 56-65 years old
- 66-75 years old
- 76-80 years old
- 80+ years old

**A specific ethnic group:**

- White
- Gypsy/Irish Traveller
- Irish
- English/Welsh/Scottish/Northern Irish/British
- Other White
- Indian
- Pakistani
- Bangladeshi
- Other Asian
- Chinese
- African
- Caribbean
- Other Black
- White & Black Caribbean
- White & Asian
- White & Black African
- Other Mixed
- Arab
- Other (please specify)

.....  
**Is your group gender specific (how your members might think of themselves) you can tick more than one**

- Male
- Female
- Prefer not to say
- Please tick if this is different from the gender your members were assigned at birth

**Does your group support people from a particularly religion:**

- Buddhist
- Christian
- Hindu
- Jewish
- Muslim
- Sikh
- No religion
- Don't know
- Other religion (please specify)

**Does your group specifically cater for any of the following groups:**

- Bisexual
- Gay
- Heterosexual
- Lesbian

**How many members does your group or project have? (if applicable). Please provide breakdown below:**

**Patients:**

**Carers:**

**Others (e.g. CNS):**

**People not affected by cancer (if the group also support people not affected by cancer):**

**Total number of people involved:**

**If this is not a one off project/activity, how will you sustain the project or activity after any funding awarded from this grants programme has been spent?**

**How did you find out about the grants programme?**

Macmillan Cancer Support website

Macmillan Involvement Coordinator

**Other:** .....